PTO/SB/80 (01-06)

Approved for use through 12/31/2008, OMB 0851-0035 U.S. Patent and Trademerk Office; U.S. DEPARTMENT OF COMMERCE

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Address  City State Zip  Country Telephone Email  Assignee Name and Address:  Schoffield Technologies LLC 1299 Orange Street Wilmington, DE 19801  A copy of this form, together with a statement under 37 CFR 3.73(b) (Form PTO/SB/95 or equivalent) is required to be filled in each application in which this form is used. The statement under 37 CFR 3.73(b) may be completed by one of the practitioners appointed in this form if the appointed practitioners is authorized to act on behalf of the assignee, and must identify the application in which this Form or Attorney is to be filled.	X The address associated with Customer Number: 23524						
Address  City State Email  Country Telephone Email  Assignee Name and Address:  Schofield Technologies LLC 1209 Orange Street  Wilmington, DE 19801  A copy of this form, together with a statement under 37 CFR 3.73(b) (Form PTO/SB/96 or equivalent) is required to be filled in each application in which this form is used. The statement under 37 CFR 3.73(b) may be completed by one of the practitioners appointed in this form if the appointed practitioner is authorized to act on behalf of the assignee, and must identify the application in which this Power of Attorney is to be filled.  SIGNATURE of Assignee of Record	OR						
City State ZIP Country Telephone Email Assignee Name and Address: Schofield Technologies LLC 1209 Orange Street Wilmington, DE 19801  A copy of this form, together with a statement under 37 CFR 3.73(b) (Form PTO/SB/96 or equivalent) is required to be filled in each application in which this form is used. The statement under 37 CFR 3.73(b) may be completed by one of the practitioners appointed in this form if the appointed practitioner is authorized to act on behalf of the assignee, and must identify the application in which this Power of Automay is to be filled.  SIGNATURE of Assignee of Record							
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Company Name   SCHOFIELD TECHNOLOGIES LLC							
Signature Pat Mothews							
Name Pat Mathews Date 9 August 2007	Name Pat Mathews		Date	9 August 2007			
Title Authorized Person Telephone	Title	Authorized Perso	n	Telephone			

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